

ARIZONA DEPARTMENT OF PUBLIC SAFETY

Private Investigator/Security Guard Licensing Unit

P. O. Box 6328, Phoenix, AZ 85005

2102 West Encanto Blvd. Phoenix, AZ 85009

(602) 223-2361



CARD REPLACEMENT REQUEST

CHECK ALL THAT APPLY: ☐ Replacement ☐ Name Change

Please complete all applicable parts of this form. For Lost, Stolen, or Change of Name, a **\$10.00** fee is required in the form of cash, money order, cashier's or certified check, payable to **DPS**.

CREDIT CARDS, DEBIT CARDS AND PERSONAL CHECKS ARE NOT ACCEPTED.

Date: _____

Name: _____
Last First Middle

Social Security Number: _____ - _____ - _____ Date of Birth: _____
Month Day Year

_____ This is to notify the Arizona Department of Public Safety in writing that my registration card has been lost or stolen, and a replacement registration card is requested.

_____ This is to notify the Arizona Department of Public Safety of a change of name by marriage or other legal means. **A copy of my marriage license or official document from the court to legally change my name is enclosed.**

Residence Address: _____
Street Name & Number Apt /Lot #

City/Town Zip Code

Mailing Address: _____
Street Name & Number Apt /Lot #

City/Town Zip Code

Home Phone: (____) _____ - _____

Business Phone: (____) _____ - _____

Signature



Please mail the completed form and materials to the PO Box or bring to the Licensing unit.